

1. CIR./DIST./DIV. CODE TNW	2. PERSON REPRESENTED McKee, Raymond	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER 2:01-020085-009	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER FILED BY
7. IN CASE/MATTER OF (Case Name) U.S. v. McKee	8. PAYMENT CATEGORY Felony	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE (See Instructions) Supervised Release
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 21 846=CM.F -- CONSPIRACY TO MANUFACTURE CONTROLLED SUBSTANCE			
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS Ganguli, Juni 40 S Main St. Suite 1540 Memphis TN 38103		13. COURT ORDER <input checked="" type="checkbox"/> A Appointing Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> R Subs For Retained Counsel <input type="checkbox"/> Y Standby Counsel	
Telephone Number: (901) 544-9339		Prior Attorney's Name: _____ Appointment Date: _____	

14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions)

THOMAS M. GOULD
CLERK U.S. DISTRICT COURT
WD OF TN, MEMPHIS

Thomas M. Gould
Signature of Presiding Judicial Officer or By Order of the Court
08/10/2005
Date of Order Nunc Pro Tunc Date
Repayment or partial repayment ordered from the person represented for this service at time of appointment. YES NO

CLAIM FOR SERVICES AND EXPENSES

FOR COURT USE ONLY

CATEGORIES (Attach itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
15. I n C o u r t	a. Arraignment and/or Plea b. Bail and Detention Hearings c. Motion Hearings d. Trial e. Sentencing Hearings f. Revocation Hearings g. Appeals Court h. Other (Specify on additional sheets)					
	(Rate per hour = \$)	TOTALS:				
16. O ut o f C o u r t	a. Interviews and Conferences b. Obtaining and reviewing records c. Legal research and brief writing d. Travel time e. Investigative and Other work (Specify on additional sheets)					
	(Rate per hour = \$)	TOTALS:				
17.	Travel Expenses (lodging, parking, meals, mileage, etc.)					
18.	Other Expenses (other than expert, transcripts, etc.)					
GRAND TOTALS (CLAIMED AND ADJUSTED)						

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE
FROM _____ TO _____20. APPOINTMENT TERMINATION DATE
IF OTHER THAN CASE COMPLETION

21. CASE DISPOSITION

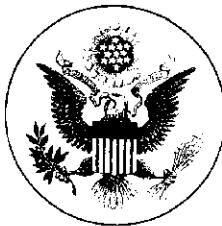
22. CLAIM STATUS Final Payment Interim Payment Number _____ Supplemental Payment
Have you previously applied to the court for compensation and/or reimbursement for this case? YES NO If yes, were you paid? YES NO
Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? YES NO If yes, give details on additional sheets.
I swear or affirm the truth or correctness of the above statements.

Signature of Attorney: _____ Date: _____

APPROVED FOR PAYMENT - COURT USE ONLY				
23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR/CERT
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER			DATE	28a. JUDGE / MAG. JUDGE CODE
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment _____ approved in excess of the statutory threshold amount.			DATE	34a. JUDGE CODE

This document entered on the docket sheet in compliance with Rule 55 and/or 32(b) FRCrP on 08/10/2005

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Notice of Distribution

This notice confirms a copy of the document docketed as number 415 in case 2:01-CR-20085 was distributed by fax, mail, or direct printing on September 27, 2005 to the parties listed.

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Honorable Bernice Donald
US DISTRICT COURT